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ABSTRACT

Cree culture emphasizes non-interference in the affairs of others and delaying actions until the "right time." These values were an obstacle to developing proactive interventions in two adolescent group homes in Cree Territory, in northern Quebec. Group home houseparents and child care workers were native Crees chosen for their traditional orientation, and had considerable experience with youths but little formal education. The non-native group home coordinator facilitated a staff training program designed to integrate Cree traditions with generally accepted practices of treatment planning. Program participants translated non-native concepts by creating the term "Cree Helping Circle" to encompass the people involved in the intervention process, and by naming the treatment plan "Helping Path Plan." The plan outlined the reasons the youth was in care, the youth's destination after care, and criteria for success, and also defined goals, tools to achieve goals, helpers, and the "right time." Other program achievements included (1) expansion of the role of tribal elders and incorporation of legends and the Medicine Wheel in Helping Path Plans; (2) elimination of houseparents' fear of dealing with crisis issues through inclusion of other persons in decision-making; and (3) completion of a model treatment plan. This report contains 11 references. Appendices include a bilingual (Cree/English) community brochure explaining group home services, notes on Medicine Wheel presentation, and a sample Helping Path Plan. (SV)

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The Development of Proactive Interventions in a Native Group Home

by

D. Lynn Hanley

Cohort XXII

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A Practicum Report Presented to the National Master's Program for Child Care Administrators in Partial Fulfillment of the Requirements for the Degree of Master of Science

NOVA UNIVERSITY

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AUTHORSHIP STATEMENT

I hereby testify that this paper and the work it reports are entirely my own. Where it has been necessary to draw from the work of others, published or unpublished, I have acknowledged such work in accordance with accepted scholarly and editorial practice. I give testimony freely, out of respect for the scholarship of other workers in the field and in the hope that my own work, presented here, will earn similar respect.

October 29, 1988
Date

D Lynn Hulsey
Signature of Student

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Abstract

The development of Proactive Interventions in a Native Group Home. Hanley, D. Lynn: Practicum Report, Nova University, Master's Program for Child Care Administrators. Descriptors / Group Homes / Treatment Center / Child Care / Treatment Plan / Intervention / Training / Native / Cross-Cultural / Acculturation / Ecological Child Care / Enculturation.

Cree Culture operates on a policy of non-interference in dealing in the affairs of others. This is an obstacle to creating proactive interventions to two adolescent group homes in the Cree Territory.

In the role of group home coordinator, the author facilitated a training program with an Ecological Systems approach designed to incorporate this ethic. The training model created a network that had not existed previously within the Cree community.

The training program was specifically designed to integrate Cree tradition, with generally accepted treatment planning.

Results included the creation of the "Cree Helping Circle", a circle that encompassed all helpers significant to the youth. This circle responds to the questions why a youth is in care, where the youth is going after care, and what needs to be different for the youth to be successful.

The Cree Helping Circle was the foundation for the "Helping Path Plan" which is a proactive intervention model.

The heart of the [social] program lies within native communities. The solution, therefore, must come from within the same communities. Others may assist, but the native peoples must be subjects of the helping process and they must direct the process themselves in their own way.
(Bopp & Bopp, 1983, p.3)

Chapter 1

BACKGROUND

Political Perspective

Self-government is paramount for native groups across Canada. In Quebec, Canada, the James Bay and Northern Quebec Agreement was signed on November 11, 1975 and established Cree control over health, education, administration of justice, policies and economic development.

The Crees have chosen to adapt "White Man's Law" to the native culture while maintaining Cree control. Accordingly, group home services for problem youth were created to accommodate youth in crisis subject to the following laws:

1) Young Offenders Act - a federal act passed July 7, 1982, respecting young offenders between the ages of twelve and eighteen residing in Canada.
2) Youth Protection Act - a provincial act passed in 1977 ensuring the protection of youth under eighteen years of age.

3) Health & Social Services Act - a provincial act ensuring the right to health services and social services in the province of Quebec.

Prior to 1985, young people were sent to out-of-area non-native reception centres for group home services. Dissatisfied with the results, the Cree approached a Montreal reception centre to tender a development plan for group homes in the North. The project was implemented in September 1985 when the Cree nation contracted two non-natives, a child care worker and a coordinator, to establish the service. These non-natives provided the structure; Cree staff provided the cultural content and programming. The treatment is founded on a "milieu" approach and integrates Cree lifestyle and tradition into therapeutic activities.

Group Home Program

The group homes use a houseparent model. Houseparents work 24-hour shifts on a three-day four-day schedule. Houseparents are recommended by the Band Council or significant members of the community and hired by the agency based on their 1) experience in raising a family, 2) role as natural helpers in the community and 3) orientation toward a traditional Cree lifestyle. The houseparent model was chosen over other models because of its similarity and compatibility with traditional Cree family structure.

The staffing complement is: one coordinator, one childcare worker, four regular houseparents and two relief houseparents (the childcare worker is a recent addition).

The group home serves Cree youth between the ages of 12 and 18 governed by the Youth Protection Act, the Young Offenders Act and the Social Services Act. Placements are available for emergencies (24-hours), short terms (under six months) and long terms (over six months). Criteria for acceptance into the program include:

- unmanageability at home, at school and in the community
- involvement with drugs, alcohol, or solvents;
- breaking the law; and
- any issue jeopardizing the youths's safety and development.

Programming at the group home encompasses the following four categories: daily living routine, school, individual orientation, and traditional activities.

Daily Living Routine

These structured events produce consistency and enables the youths to develop organization and planning skills.

School Program

Most of our youths have been unsuccessful in school and

are registered in a program. "Road sheets" are used to record attendance, homework and comments and have provided the added structure needed for success.

Individual Orientation

This is an informal program for youths who are not registered in school. This program involves youths in either a work or bush camp setting.

Traditional Activities

Bush Camp Program

This is our most innovative program. The group home follows the traditional Cree hunting, fishing and trapping cycles amd involves short excursions and longer trips:

Fall - goose hunt/moose hunt

Winter - caribou hunt

Spring - goose hunt

Summer - fishing

During this time in the bush Cree customs, beliefs and values are passed on to the youths. Families co-exist, legends are told and crafts are created.

Bush life has a social organization of its own. Roles are clear. Everyone contributes by maintaining the camp or hunting game. In the bush , the youths re-establish connections with their heritage; they find out who they are and where they fit in the world around them.

In House Program

Only Cree is spoken in the group home, with two exceptions: to accomodate non-native staff and where concepts have not been translated into Cree. Written information pertaining to daily functioning is in Cree and English. Food is mostly bush food. (Native food has significant spiritual meaning to the Cree and is therefore essential to the overall well-being of native youth).

Demand for the service warranted opening a second home in April 1987. The author transferred to Group Home Number Two in August 1987. A native coordinator was hired for Group Home Number One and made it a fully native-staffed program. This achieved a major agency objective. The author's responsibilities as a coordinator include supervisory, administrative and clinical tasks as well as in-service training, budgeting, report writing, maintaining community relations, and delivering services to youth. The author's final responsibility is to train a native coordinator for Group Home Number Two by February 1989.

Chapter 2

STUDY OF THE PROBLEM

Problem Definition

The problem is: How do we add a proactive intervention to the excellent group care services now available in the north? At present, many discussions and decisions concerning youth occur after the "incident." This is reactive and does not empower staff or clients to deal with the issues leading to the youth's placement.

Evidence

The agency emphasizes both formal and informal training. The houseparents and childcare worker have considerable experience with youths but little or no formal education. We have focused on fundamentals of basic childcare. Trainers from Montreal, internal staff meetings and on-the-floor supervision have increased our knowledge and abilities.

In November 1987, a consulting specialist in staff development assessed our training needs. Through observation, discussions and meetings with all personnel involved, the consultant identified problem areas:

Group Home Number One

a) How to handle crisis situations.

b) How to talk to parents when they are upset or angry.

c) How to handle special problems: runaways, alcohol/drug abuse.

d) How to handle relationships between boys and girls in the group home.

e) Additional information on the laws governing youths.

f) Clarification on the role of the Social Service community workers in relation to the group home.

g) How to support the school in meeting the needs of group home youths.

h) Different approaches to counselling youths.

i) Additional safety/security information.

Group Home Number Two

a) How to handle crisis situations.

b) How to develop a differential approach to working with different youths.

c) Exploring group work possibilities.

d) Individual counselling techniques.

e) Additional information on the laws governing youth.

f) Administrative issues related to policy/procedure.

g) Role of parents in relation to the group home.

Group Home Number One and Group Home Number Two have many common training needs. Specific incidents in the group homes were identified as problems.

Group living is part of the traditional Cree way of life. Placing youths with problems under one roof is not. Elders in traditional Cree society banished individuals who did not "fit in". As everyday members of the Cree community, the house-parents had little experience in dealing with aberrant behavior. Youths in group homes display inappropriate behavior and make inappropriate comments. When this occurred, the houseparents became anxious and unsure of how to proceed.

The Cree of today hunt, fish and trap for a living within a strong set of values and traditions. Life in the bush is very predictable. However, youth that act out are not. Sindell, P. (1968 : p. 91) summarizes:

> Traditional Cree enculturation takes place primarily in the context of multi-generational kin groups and stresses food sharing and cooperative labor, indirect rather than open expression of aggression and self-reliance. Interpersonal relations within the kin group are supportive but verbal expression of dependence is discouraged. Children are viewed as little adults and contribute labor and food to the kin group commensurate with their level of maturity. Children's self-reliance is placed in the service of the kin group.

In the bush, youths are given much autonomy and are expected to be self-reliant. The youths eat when hungry, sleep when tired. The environment, not people, sets limits. Non-interference is valued. Respect and consideration for

peoples' choices maintains positive affective ties. Indirect limits are set through gossip, teasing, and legends.

The group homes reinforced many of these values particularly when the group is in the bush. In town, the house-parents must be more directive.

Historically, when youths would "act out", the community viewed them as immature, as misunderstanding their position in the family and in the community. People waited for the "right time" - that is, for the youth to realign with family and community values. The "right time" is rooted in feelings, weather conditions, seasonal rhythms, ceremonies or, internal clocks. To achieve program goals the houseparents must act contrary to some of these traditions.

Many of the above conflicts are inevitable when a non-native system meshes with native values. The conflict is particularly pronounced in this instance by the compelling need for proactive intervention versus the strong cultural bias for non-intrusion into other people's lives.

The author was disadvantaged by the paucity of literature capable of providing a more global perspective of the issues. Indeed, group home services in northern Quebec are at the pioneering stage. Few social service agencies like this exist in Quebec or elsewhere, and, consequently, little is written.

In addition to the cultural issues, the group home lacked one key element to successful differential treatment, - a formal plan outlining goals, objectives, techniques, and interventions for each youth in placement. The group home also lacked a plan detailing the duties and responsibilities of staff, families, and community workers.

In 1985, the goal was to develop group home services with the Cree. The objective to date has focused on training houseparents to provide effective care. The group home staff are now very competent.

Today, the objectives are to maintain the therapeutic structures, institute proactive interventions, and enable staff to effectively market the service to the community. Marketing means articulating 1) the nature of the service and 2) for whom the service is best suited.

CHAPTER 3

Goals and Outcome Objectives

Goal

The goal was to implement a "treatment planning process" in the group home by October 1988.

Outcome Objectives

- To translate the concept of treatment planning from a White Man's terminology to a Cree terminology.
- To develop a training program for group home staff and community workers based on the treatment planning process by September 1988.
- To develop policy and procedure on the treatment planning process by October 1988.
- To eliminate houseparents' and childcare workers' fear of dealing with crisis issues with clients by October 1988, as measured by before and after interviews.
- To complete one treatment plan by October 1988.

Chapter 4

SOLUTION STRATEGIES

Nova University initiated a computer search to review the literature on native training programs. The search failed to reveal any published literature on this topic. Interviews were conducted with colleagues inside and outside the Agency, and literature on native culture was reviewed as was literature on childcare.

The chosen strategy evolved from: 1) the recommendations and training proposal submitted by a consultant, 2) Agency Training and Development Policy and 3) consensus development with staff.

The strategies involved:

1) Creating a Cree word to explain the value of a "treatment plan", for youth, family and professionals;
2) Developing a training program for group home staff, community workers, and trainers in which the trainers provided the structure and the group home staff provided the native content. This collaboration produced a service culturally specific to the Cree and created an innovative treatment planning model; and
3) Developing policies and procedures for treatment planning in the group homes.

The following components were essential to implement the above strategy:

1) Permission by the Director of Resources to carry out the training program,
2) Trainers selected by the author and the Director of Resources,
3) Trainers agreeing to content, time, place, and costs,
4) Staff available for the training program and, consequently, hiring relief staff to work during training sessions,
5) Funds allocated and approved for trainers, and staff by the Director of Social Services,
6) Selected site for the training program,
7) Materials purchased and made available during the sessions, and
8) Arrangements made for trainers and visiting participants: hotel, food, plane tickets, ground transportation, etc.

The following is an account of what happened during the Implementation Plan:

Critical Tasks

Activity	Time
1) Assessment of training needs of group home staff (pre-training assessment)	March 9, 1988
2) Report: Staff Development program needs submitted to Director of Treatment	March 15, 1988
3) Preparation of action plan for training program	June 15, 1988
4) Review proposal for training program; Set up meeting with trainers	August 9, 1988
5) Meet with trainers	September 6, 1988
6) Training proposal submitted for approval to Director of Resources (direct supervisor).	August 15, 1988
7) Discussion of training program at group home meetings	August 17, 1988 August 24, 1988 August 31, 1988 September 14, 1988
8) Delivery of Training program	September 26-29 1988
9) Development of policy and procedure	November 1988
10) Completion of actual treatment plan	September 29, 1988
11) Post-training assessment	October 1, 1988

On June 15, 1988, the author met with the staff development consultant to review a recent report on the group home and, to plan out the next steps for the training program. Discussion encompassed logistics, lines of communication, training philosophy, and parameters of the proposal.

On August 9, 1988, the author met with the staff development consultant to review the proposal, discuss possible trainers, and amend the Nova proposal. Key components agreed upon were:

1) The training program required collaboration of trainers and participants.
2) Social services workers would be invited to the training as an integral part of the network.

The staff development consultant scheduled a meeting with two trainers for September 6, 1988. The Director of Resources, the native coordinator of Group Home Number One, and the author were invited to this meeting.

A meeting was held with the above parties on the morning of September 6, 1988, with the staff development consultant as chair. The agenda included:

1) Reviewing the most recent training with the group homes,
2) Reviewing the author's proposal,
3) Completing ground work prior to the training session.

A brainstorming session was held to create a Cree term to express the intent of the treatment planning process. The agreed upon Cree term translated into "The Helping Circle".

On the afternoon of September 6, the Director of Resources, staff development consultant, native coordinator and the author met. The training was set for September 26-29, 1988. The agenda and format were agreed upon. A list of tasks and staff assignments was prepared.

Group home staff meetings were used to prepare staff for a high level of participation during the training. English childcare concepts were framed in Cree terminology. Prior training was reviewed. The value of training as an ongoing process was emphasized as was building on prior achievements.

On Friday, September 24th, the trainers met to review the material they would present. (Appendix A: 34)

The training proposal was divided into five sections:

A. Creation of a Term

B. Native Development Model

C. Families and the Group Home

D. Treatment Planning

E. Develop a Policy and Procedure on Treatment Planning

(Erikson, E.; 1968)

The post-training session was divided into two sections:

A. Completion of an actual treatment plan

B. Post-training assessment

A. Creation of a Term: (September 26, 1988)

Clear definitions of philosophy and process are the foundation for effective treatment planning. Brainstorming sessions were held during staff meetings and planning meetings prior to the training session. The term "Cree Helping Circle" was selected to encompass the group of people engaged in supporting the youth. The "circle" includes the youth him/herself, family members, social service workers, the group home staff, elders and significant others.

Our talks then progressed to a discussion of the tools needed to support the Helping Circle (Appendix B: 43).

B. Native Development Model: (September 27, 1988)

A treatment plan, focuses on why the youth is in care, where the youth is headed next, and what has to change for the youth in order for him to be successful. The treatment plan arises from the developmental stages of youth and societal norms for behavior. Participants extensively discussed these issues. The Chief presented the Medicine

Wheel as handed down by the elders, and explained the four components of the individual and their relationship. (Appendix C: 44).

Youth in crisis are in disharmony, and "fixated" in one of the four quadrants. Traditional healing methods were outlined. The Community Wheel shows four areas of community life which support the youth in being successful and productive.

A major philosophical issue was raised with respect to looking at normal behavior, namely that the Cree have no word for normal. The term used in Cree is "acceptance". Cree youth are accepted for who and what they are without reference to a standard.

As a prelude to developing a native standard, we looked at the norms for "non-native" adolescents, as defined by Erik Erikson's (1968) developmental stages:

Trust vs Mistrust

Autonomy vs Shame

Iniative vs Guilt

Identity Formation vs Identiy Confusion

Intimacy / Generativity

Two groups were assigned the goal of developing a Cree life cycle. With a trainer's support, each group listed developmental tasks. Both groups combined to produce the Cree Life Cycle Wheel (Appendix D: 49).

C. Families and the Group Home:

This section of the proposal included:

1. Lifestyle of the Cree family,
2. Structure and functioning of the Cree family,
3. Why the Cree youth is unable to remain at home,
4. The youth, family, community, and culture are involved in defining the problem(s) and in shaping the solution(s).

This session intended to examine how treatment goals are established and implemented. However, this section was amended.

Instead of focussing on Families and the Group Home, the trainer discussed behavioral norms for non-native adolescents and indicators and predictors of youth with anti-social behaviour vs youth with emotional disturbances. Earlier in the training session, the Chief commented that youths come into the group home like a storm. The analogy was expanded to describe youths in crisis as youths with dark clouds. The group saw youths that exhibited anti-social behaviour as youths with a "trouble-maker" cloud and emotionally disturbed youths as youths with an "emotional disturbance" cloud.

D) Treatment Planning and the "Helping Path Plan"

(September 28, 1988)

This section intended to define a treatment plan, in terms of setting goals, selecting techniques to achieve these goals, and identifying the key players, and designing a clear, organized path around the "Helping Circle." Chistopher, a youth in the group home, was used as an actual case in order to develop a treatment plan. The group chose "Helping Path Plan" to describe the plan.

A group discussion answered these questions:

- Why did Christopher come into the group home?
- Where was Christopher going after the group home?
- What had to be different before Christopher could successfully leave the group home?
- What do Christopher's behaviours mean?
- What does Christopher need?

A plan was designed for Christopher (Appendix E: 50) using "Goals", "Helping Tools", "Helpers", and "Right Time" as headings. These terms were borrowed from earlier sections to help the group focus on filling out the plan. "Right Time" was chosen to encompass all types of time, whether it be a date, a feeling or a season.

Difficulties were encountered in developing the plan when the group attempted to role play a "Helping Path Plan" session. Participants and trainers assumed an identity in Christopher's helping circle. However, having Christopher,

his grandfather, friend, social service worker, and the group home staff all at the same meeting, even in the roleplay, was too threatening for Christopher and his grandfather, role played by participants, and was counter-productive to achieving the session goals. The group decided to hold several meetings to obtain the necessary information and to enable participation of all parties. The group decided that creating structures that foster agreement and consensus would produce a more effective plan

E) Developing a Policy and Procedure for the "Helping Path Plan"

This section was amended. Policy was to be developed during the training session, However the Director of Resources asserted that policy formation is Management's prerogative and responsibility. The training program will be completed in Group Home Number One at the end of November. After the program is complete, policy and procedure on the "Helping Path Plan" will be developed and encompass both group homes.

Post-Training A (September 29, 1988)

The goal was to prepare an actual Helping Path Plan. This goal was achieved in Part D.

Post-Training B

A post-training assessment was carried out during the group home staff meeting of October 1, 1988 and examined the usefulness of the training session in terms of content, application, and practicality. The houseparents and community workers were satisfied with the work accomplished.

The assessment process involved asking a question, waiting for the group to reach consensus while speaking Cree to each other, and obtaining an English translation of the answer by a spokesperson. The following comments were made:

- The group home staff were still assimilating the training session and felt that much work had been done and it would all be beneficial for the kids.
- The group home staff had been ridiculed by some community members who felt staff were just babysitters. Staff now feels they have something to show that proves active treatment is provided. The houseparents felt that a "Helping Path Plan" will enable them to focus more on whatever specifically needs doing with each youth.
- The group home staff felt that the "Helping Path Plan" will be very helpful in writing reports.
- They will be better prepared to make effective decisions because more information will be available.

- They will know what the issues are before the youth acts out. They will know how to intervene and meet needs before problems arise.

Chapter 5

RESULTS, CONCLUSIONS, AND RECOMMENDATIONS

The goal of this practicum was to develop proactive interventions in a native group home. This was successfully accomplished by developing a "Helping Path Plan" that would offer a clear path for problem youth from the community to the group home, working within and through the group home, and from the group home to the community. The following objectives were imperative to achieving this goal:

1) Translating the concept of "Treatment Planning" from a "White Man's" terminology to a Cree terminology. The "Cree Helping Circle" was created by group consensus to identify the people involved in the intervention process. These people may include parents, social service workers, police, the legal system, the group home staff, relatives, elders and significant others. The plan was named "Helping Path Plan" and makes explicit the reasons a youth is in care, where the youth is going after care, and the criteria for success. The plan defines Goals, Tools to achieve these goals, Helpers, and the "Right Time". The term "Right Time" was chosen because it can encompass all types of time and is congruent with the Cree lifestyle.

2) Developing a training program for group home staff and community workers based on the treatment planning process, by September 1988. The training program was held on September 26-29, 1988 (Appendix F: 52). The collaboration of the group home staff and social service workers was essential to creating the "Helping Circle" and the "Helping Path Plan". The process was exciting as it was the first group home training program including staff from other services for a stronger network, clearer definition of roles, and articulation of responsibilities. Such activities ensure more effective care than is currently available at the group home.

The training program was a learning experience for everyone. Concepts commonly used by non-natives, such as "normal", were completely alien to the Cree way of life and emphasized the differences in how natives and non-natives see the world. In addition, a new resource sector has become available as a result of the helping circle. Prior to the training, elders were underutilized. Now staff are open to benefiting from the skills and wisdom traditionally passed on by the elders and can be included in our programming. Native techniques such as telling legends can now be incorporated into Helping Path Plans to support youths in keeping in touch with who they are and to balancing

the forces in the Medicine Wheel. The Cree oral tradition is still the best learning tool for Cree youths.

Use of the Medicine Wheel as handed down by the elders, has been very effective in presenting the different aspects of the individual. It offers both a simplistic explanation of why youths act out and several effective healing techniques. The focus has shifted. Youths are encouraged to find a balance within themselves rather than to actually change. Change is only in the domain of the shaman or medicine man.

In developing the Cree Life Cycle, the group became aware that one wheel could not encompass the significant and rapid change occurring in the Cree territory. Rather, two or three wheels are needed to illustrate important aspects of the Cree Life Cycle as described in Appendix D (p.49). This graphic describes a community in transition.

The Cree life cycle is not what it used to be. Radio and television expose people to new ideas and products. Roads enable ready access to diverse products both positive and negative.

The group realized that the Cree must individually and as a nation reassimilate lost traditions such as the teachings of the elders (while these teachings will not return people to the old ways, they can guide people safely into the future).

3) Developing a Policy and Procedure on the Treatment Planning Process by October 1988. The author considers this aspect crucial to the success of the project. Once approved by the agency, this policy will form a structure strengthening the group home and bringing it closer to freedom from direct supervision by non-native support people. It will also facilitate smooth transition to the native coordinator hired this coming winter.

Unfortunately, the grup has been unsuccessful in attaining this goal to date. The time frame has been amended and a Policy and Procedure will not be prepared until after the training session for the coastal group home staff and social service workers some time in late November 1988. After that training, we will be able to provide a standardized agency policy and procedure that will cover both group homes.

4) Eliminating houseparents' and childcare workers' fear of dealing with crisis issues with clients by October 1988, as measured by before and after interviews.

The training program has been successful in providing houseparents with an orientation and direction in dealing with youths in care. "Out-of-character behaviours" will be better understood and easier to deal with. Staff report feeling better prepared to deal with crisis issues. The goals, helping tools, helpers and time frame will be determined by consensus of all the parties involved, rather than by unilateral decisions made by the group home. This conforms with the Cree value system.

5) Completing a treatment plan by October 1988. A model treatment plan was developed on September 29, 1988 as part of the training session. An actual case was used so that the participants could actively experience the work they had done all week. Issues arose concerning the logistics for obtaining information needed to draw up the plan. This aspect should be clarified prior to developing policy and procedure. The Group Home Training Program falls into line with the Group Home Triennial Planning Objectives for 1986-1989, namely to develop a differential program. Helping Path Plans establish the structure. The training program also

coincides with the agency Training and Development Policy as expressed in 2.0.

> To attain, through training... and by catalyzing external institutions, a realistic level of Cree staffing within a realistic time frame so that the agency can provide more socio-culturally appropriate health and social services, be representatively staffed by people form the local population which it serves, and lower costs associated with non-resident turnover, transportation, and lodging.

The trainers who led the training session were from external institutions in accordance with the guidelines of the Training and Development Policy. They generously and sensitively volunteered their expertise in promoting the technology of childcare to support the group home in developing the Cree "Helping Circle" and "Helping Path Plan".

As native groups across Canada and the United States gain increasing control over their health services, social services, judicial systems and economic development, group home services on native territory will become commonplace. The development of culturally sensitive systems, policies, and procedures is essential to group home success.

This pilot program is a success, and will have a lasting impact on all native residential programs.

A native structure has been created in the group home with a language and tools. Now the task is to use the tools and share the knowledge.

Follow-On

The most effective way of furthering the training program is to demonstrate by example.

This document will source:

1. Policy and Procedure on the Helping Path Plan;
2. development of an elders program;
3. further training particularly in the area of family.

Dessemination is crucial to sharing the knowledge gained. This paper will be submitted to the agency documentation Center, and distributed to the group homes to government officials in Native Affairs, and to other agencies. As the next step, publication will offer access to the professional community at large.

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APPENDICES

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ᐃᐋᔅᓯ ᑲᑲᓐᐁᐃᒪᒪᓄᑦᑦ ᐅᐸᓯᑯᔅ
ᑲᐃᔅᓄᑲᑌᓯᓗ
ᑖᓐ ᐁᐃᔅ ᑲᓐᐁᒪᒪᓄᑦᑦ ᐃᐋᔅᓯ
ᓄᔅᑦ ᑖᓐᑌ ᐁᓯᒪᔅ ᐃᓯᒪᐃᐱᑦ ᐃᓄᓯᓗ
... ᒥᑦᑕᓄ

26-30 ᓯᐸᑌᐸᓐ ᐱᔅᒧ 1988

TRAINING PROGRAMME FOR UPAAHCHIKUSH GROUP HOME
"THE MEDICINE WHEEL AND THE CREE HELPING CIRCLE"
MISTASSINI
26-30 SEPTEMBER 1988

ᐊᑲᐅ ᒪᑲᐅ

ᑲᐋᓯᐃᐱᑦ ᐁᓯᔅᓄᑦᑕᒪᑎᐃᓯᓯᓯ
ᑲᐅᔅᓯᐱᒪᓂᔅᑦᑦ ᐁᑲᓐᐁᒪᒪᓄᑦᐃᓇᑦ

Joan MacLean
Assistant Director of Professional Services
Shawbridge Youth Centres

THE MEDICINE WHEEL

1. SPIRITUAL
2. EMOTIONAL
3. MENTAL
4. PHYSICAL

Goal of individual development

- Achieve balance among four forces of the medicine wheel.

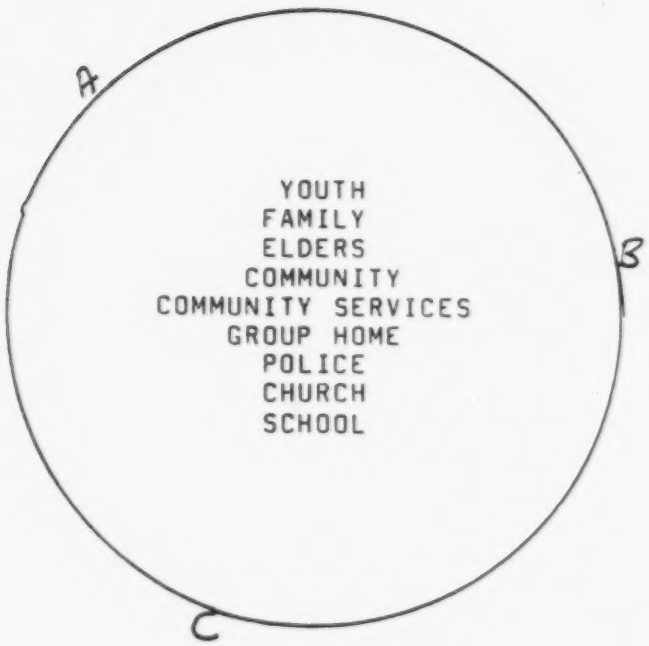
ᓀᑲᐃᓴ ᓇᓇᑲᓀᓀᐊᑲᓄᓐ ᐊᐃᐃᓴ

1. ᐊᒪᑯᓂᐃᓐ ᐱᒪᑎᓴᓂᐃᓐ
2. ᒐᓐ ᐁᐱᓴ ᒪᓴᑲᐃᓴᑕ ᐱᓀᑎᐤ
3. ᒐᓐ ᐁᐱᓴ ᐃᓯᒪᑲᑕ
4. ᒐᓐ ᐣᓀᓀᓭᐤ ᐱᒪᑎᓴᑕ

ᐯᓂᑯ ᐃᓗᐣᓐ ᓀᐸᐃᓴᐊᓂᐃᐧᐃᓂ:

- ᓀᓴᐁ ᐣᓀᐊᓴᑕ ᐊᓄᓭᐤ ᐁᓄᐁᓄᓗᐧᐃᐤ ᑲᒪᓴᓇᐯᐊᓂᑲ ᐃᓴᐱᐱᓀ

THE HELPING CIRCLE



A) Why are youth in care?

B) What has to change before a youth can live successfully outside the group home after care?

C) Where do youth go after the group home - after care?

ᒪᒧ ᐃᓕᐃᑐᐃᓐ ᒥᒃ

A) ᓇᓗᓴ ᐃᓕ ᖃᓄᐃᓕᒪᓐᓂᒃ ᐊᐃᓴ

B) ᓂᓐ ᓇᓕᐃᓴ ᐃᓕᐊᖃᓐᐃᑦ ᐊᐃᓴ ᓴᓄ
ᓇᓕᒥᓱᐊᑦ ᖃᑦᐃᐃᓕ ᐊᓐᑦ ᖃᖃᓐᐃᓕᒪᓐᓂᒃ

C) ᑭᓐᔪ ᐅᑐᑦᑕ ᐊᐃᓴ ᖃᓕᓴᒃᑕᓕ ᐊᓐᑦ ᐅᖃᓐᐃᓕᒪᓐᓂᒃ ᑭᓐᔪ ᐅᑐᑦᑕ ᐊᐃᓴ ᖃᓕᓴᒃᑕᓕ ᐊᓐᑦ ᐅᖃᓐᐃᓕᒪᓐᓂᒃ

THE CREE HELPING CIRCLE

A) WHY ARE YOUTH IN CARE?
HOW DO CREE YOUTH COME INTO THE HELPING CIRCLE?

No one is to blame; however, there are a number of factors that bring adolescents into the helping circle and into care in particular.

1. THE YOUTH CANNOT FUNCTION AT HOME:

The source of the problem is often the parents (arranged marriages, marital problems). Some parents have not learned how to parent, and they wait until there is a problem to begin to react. Some of the difficulties start early in the adolescents' lives.

2. SOMETIMES THE KIND OF FAMILY AFFECTS THE YOUTH:

- single parent families
- adopted children
- young parents
- less access to elders
- parents working in town or far from town
- lots of kids, close together

3. DIFFICULTIES IN FAMILY FUNCTIONING:

At times there is confusion between parental and community authority, e.g.

- Can families have "curfews"?
- Does the community have to have a "curfew" to support the family?
- Why is there not a "curfew" in the community?

In addition, youth sometimes imitate parental behavior, e.g. fathers who stay out and abuse alcohol.

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A) ᐃᓕᓴᕐᕕᒃ ᐊᑐᕐᕕᒃ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ

ᑲᑎᒪᔨᓂᖅ ᐊᑐᖅᑐᒥ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ

ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ

1. ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ

ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ

ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ

ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ

ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ

2. ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ

ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ

- ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ

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- ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ
- ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ
- ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ
- ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ

3. ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ

ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ

- ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ
- ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ
- ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ: ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ ᐊᑐᖅᑐᒥ ᐃᓄᐃᑦ

4. DIFFICULTIES IN THE YOUTH'S INDIVIDUAL DEVELOPMENT:

There have been imbalances in the emotional, physical, intellectual and/or social development of the youth. There is a need for the youth to become more balanced.

5. PROBLEMS IN THE COMMUNITY AMONG KIDS:

Youth commit infractions, crimes which are eventually taken to court. Often they have been bored and got into trouble looking for something to do. The level of "danger" is rising in the communities, e.g. alcohol, drug abuse.

6. SCHOOL PROBLEMS:

Some youth are not attending (even when they are in group homes). They question the relevance of school. The parents think it is more important than youth do.

7. OUTSIDE INFLUENCES:

- refusal to attend school
- staying out past "curfew" with friends
- get "carried away" by their music
- pact among kids vs parents
- seasonal e.g. summer.

Serious problems, as described by parents, happen when youth is neither in school nor in the bush.

4. ᐊᐃᓕ ᐃᓄᒃᑎᑐᑦ ᐃᓕᓴᐃᓐᓇᖅ ᑲᑎᒪᔨᓂᖅ

ᓯᑕᒥᓐᓂ ᐊᐃᓕ ᓴᓗᓯᐊᑦ ᐃᓗᐊᓂ ᓄᓇ ᐅᓪᓗᒥᐅᑎᓯᒪᓂᖅ
ᑲᓴ ᐊᒃ ᓯᓚᖅᑐᐃᑦ ᐱᓕᕆᓂ ᐊᑐᓂᓗᒃᑐᑦ
ᐅᑦᑕᐃᐅᑦᑕᒪᓂᖅ ᓄᓇ ᐅ ᐱᓕᕆᓂ ᐊᑦᑐ ᑐᓴᓯᓴᐊᑦᑕ.

5 ᐊᐃᓕ ᓴᓗᓯᐊᓕᒃ ᐃᓕᓴᐅᓂ ᐱᓐᑦ ᐅᑌᓐᒧᐃᓂᖅ

ᐃᓕᓴᐅᓂ ᑲᑎᕐᓂ ᐅᓕᓐᓂᐊᓂᒃ ᓄᓇ ᐊᐃᖅᓯᐊᓂ ᑐᓴᓯᐊᓂᒃᑐᑦ
ᐅᓴᖅᑭᑦᑐᐅᒥᓗᒍ
ᐃᖅᓗ ᐊᓕᓕᓐᓂᐊᑦᑕᒪᓗᓂ ᐅᓐᑦᑕᓕᐊᓯᑦᑕᒪᓂᖅ ᑕᓐ ᑐᓴᐃᐊᓂᒃ
ᑐᓂ ᐃᖅᓴᓯᓯᓂᖅ ᐊᒍᖅᑎᓂᓗ ᐱᓐᑦ ᐃᑦᑐᐃᓐᓂᑦ ᓴᖅᑭᑎᓂᐊᓂ
ᓄᓇ ᓯᓚᑐᓂᒃᑯᑦᑕᓐᓇ ᒪᑉᓯᑦ ᐊᒥᓱᑦᑕᒪᓂᖅ.

6. ᐊᐃᓕ ᓴᓗᓯᐊᓕᒃ ᐃᖅᓯᑦᑎᐊᑕᓗᓂ

ᓄᑕᒪᓂ ᓄᓇ ᐃᓕᓴᐅᓂ ᓂᓪᓕᐊᓂ ᑐᓴᐃᐊᓂᒃ ᐃᖅᓯᑦᑎᐊᑕᓗᓂ ᐃᑦ ᐃᓐᓇ
ᑲᑕᐅᓇᑦᑎᐊᑕᒪᓂᖅ
ᐅᓐᓄᐊᓂᑦᑎᐊᑕ ᐃᐅᐃᑦᑕᒧᑦ ᐊᓯᖏᓐᓂᐊᑦᑕᓄᑦᑐᑦ ᐃᖅᓴᐃᓐᓇᖅ ᐊᐅᐃᑦᑕᒪᓂᖅ
ᑲᐅᖅᑎᓚᓂᓴᒃᑐᖅ.

7. ᐃᓄᖅ ᐊᐅᓚᓕᐊᓂ ᐊᓚᓕᐊᓂᒃ

- ᐅᑲᐃ ᐃᖅᓯᑦᑎᐊᑕᒃᑐᖅ
- ᐊᓕᓴᓚᓕᐊᑦᑕᒃᑐᖅ ᐃᓐᓇ ᓚᓕᑦᑎᐅᓂ ᓚᑐ ᐅᐃᑐᐃᑲᓐᓂᐊᓂᒃ ᐊᑎᑐᐃᑦᑐᖅ
- ᐊᐃᓐᓂᖅᓚᓕᐊᑦᑕᒪᓂᖅ ᐊᐅᑐᑦᑕᒃᑐᖅ ᑲᑐᑲᑎᓚᑲᑐᑦ
- ᐊᐅᖅᓯᒃᑐᖅ ᐃᓐᓇᓂ ᓴᐅᓚᓕᐊᑦᑕᓄᑦ ᐊᐅᖅᓯᓴᑦᑎᐊᑕᒃᑐᖅ
-

ᓚᐃᓂ ᐊᐅᖅᑎᓚᓂ ᑐᑲᑦ ᐊᐃᑌᐃᑕᑎᓯᒪᓂᖅ ᐅᓐᓄᐊᓂᑦᑎᐊᑕᒪᓂ ᐊᓯᑕ
ᐃᓚᓚᓂ ᐊᐅᑕ ᐃᖅᓯᑦᑎᐊᑕᒃᑐᑦ ᐃᓐᓇᓂ ᑐᑲᑦ ᐊᐅᑕ ᑕᑦ ᓄᓚᓚᓚᓂᖅ

8. COMMUNITY:

The community, i.e., church, school, neighbours, police, often perpetuates the problems.

"Blame people for the past and predict they will always be the same".

9. CHANGE:

People are having a hard time adapting to change. There are many differences between bush and community living, and these differences and people's adaptation to them create problems.

WHEN DOES THE SITUATION GET SERIOUS ENOUGH TO HAVE INTERFERENCE BY THE COMMUNITY?

The "problem" needs to be identified as serious by all segments of the community since non-intervention is valued.

- school
- church
- social workers/community workers
- health services
- elders
- band council
- lawyers & court
- Director of Youth Protection/
  Provincial Director (Young Offenders' Act)

8. ᐃᓄᐊᓕᖅ ᐊᑕᐃᒪᓐ

ᐃᓄᐊᓕᖅ ᐊᑕᐃᒪᓐ ᓯᒪ ᐊᓯᖏᑐᐊᖏᓐᓄᑦ ᓯᒪ ᐃᓕᓴᕐᓂᐊᓕᖏᑦ ᓯᒪ ᓴᓇᔨᓛᓕ ᓯᒪ ᖃᓄᐃᓕᐅᕈᑎᒃᓴᖅ ᔫᓂ ᓂᐊᓂᐃᑦᐊᑐᓂ ᑐᓴᕐᕕᒃ ᐊᒥᓂᓕᐊᓂᖅ

ᐃᓄᐊᓕᖅ ᐊᐊᑕᒧᐊᓘᓚᐅᔭᑕ ᐊᓐᓄᑲ ᐅᑎᓂ ᐅᑕᓂ ᐊᐃᒃ ᓯᒪ ᐊᐃᓐᓂ ᔫᓂ ᖃᐃᓐᓇᐃᑦᑐᖅ

9. ᐊᓂᓴᖅ ᐅᐃᓐᓇᐃᑦ

ᐃᓄᒃᓂ ᓯᒪ ᓇᓐᑕᓂᒃ ᓴᓴᓂᐃᐊᓂ ᐅᒥᐊᓪᓚᑕᑦ ᐊᓂᓴᖅ ᐅᐃᓐᓇᐃᑦ ᐊᓯᔪᓐᓇᖅᑐᓂᒃ ᐊᓂᓴᖅ ᐅᐃᓐᓇᐃᑦ ᓯᒪ ᐅᐃᓄᒃᓂ ᐅᐃᓄᒃᓂᓕᐊᓂᖅ ᓯᒪ ᐅᐃᓄᒃᓂ ᐅᐃᓄᒃᓂᓕᐊᓂᖅ ᐊᓂᒃ ᓯᒪ ᐃᓂᓚᐅᑎᓂ ᓯᒪ ᐊᓂᓴᖅ ᐅᐃᓐᓇᐃᑦ ᐊᓂᒃ ᓯᒪ ᐃᓂᓚᐅᑎᓂ ᓯᒪ ᓴᓇᔨᓛᓕ ᐅᐃᓐᓇᐃᑦ ᓯᒪ ᐃᓂᓚᐅᑎᓂ ᓯᒪ ᐊᓂᓴᖅ

THE CREE HELPING CIRCLE

B) WHAT HAS TO CHANGE BEFORE A YOUTH CAN LIVE SUCCESSFULLY AT HOME?

1. FAMILY ENVIRONMENT NEEDS TO CHANGE:

The basic issue among family members needs to be addressed. There needs to be agreement to do this, and a strategy developed that fits all the segments of the helping circle. Parents can participate in group home to see a different way and receive support. This "support" needs to continue when youth is at home.

2. HELP YOUTH TO FOCUS ON HIM/HERSELF:

The youth has to be helped not to always worry about or blame family or peers. He/she needs to set goals which may involve cultural and family issues.

The youth needs "counselling" about future although this is difficult since there is more focus on the past and present.

WHO HAS TO MAKE THE CHANGES?:

- parents
- child
- community
  (chief, elders, natual helpers, social service workers)

Change is a "shared responsibility", i.e. team work is crucial.

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3) ᐊᑐᓕᕆᓂᖅ ᓄᓇᕗᑦ ᐊᑐᓕᕆᓂᖅ ᐊᑐᖅᑕᕐᓂᖅ ᐊᑐᖅᑕᕐᓂᖅ ᐊᑐᖅᑕᕐᓂᖅ

1. ᐊᑐᖅᑕᕐᓂᖅ ᐊᑐᖅᑕᕐᓂᖅ ᐊᑐᖅᑕᕐᓂᖅ ᐊᑐᖅᑕᕐᓂᖅ ᐊᑐᖅᑕᕐᓂᖅ

ᐊᑐᖅᑕᕐᓂᖅ ᐊᑐᖅᑕᕐᓂᖅ ᐊᑐᖅᑕᕐᓂᖅ ᐊᑐᖅᑕᕐᓂᖅ ᐊᑐᖅᑕᕐᓂᖅ

WHO HAS TO HELP MAKE THE CHANGES HAPPEN?

- Group home staff + environment
  + programmes
- Social service workers
- Drug and alcohol workers
- Community (elders)
- Youth and family
- Church
- School
- Youth group
- Legal system
  (DYP, lawyers, judges)
- Recreational facilities

WHY ARE THE PROBLEMS WITH THE KIDS AND FAMILIES SO HARD TO CHANGE ONCE THEY GET TO THE GROUP HOME?

The problems were such that they could not be solved with youth at home. The youth needed to be placed (i.e. some of the hardest problems). As well, most of the youth in the group home are "involuntary clients", i.e. usually youth are there against their will (court order, group home - Rec. Centre). Many youth and parents deny any problems.

As noted above, many problems are long-standing, e.g. arranged marriages, marital problems.

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- ᐃᓄᐃᑦ ᑲᑎᕋᖅᓯᒪᔪᖅ ᐃᓕᓴᕐᕕᒃ ᐃᓄᐃᑦ ᓄᓇᕗᑦᐃᓕᓴᕐᓗᒍ
- ᐃᓄᐃᑦ ᓴᓇᔨᓯᒪᔪᖅ
- ᓇᑕᒥᔭᕐᓂᖅ ᓇᒃ ᐃᓕᓴᕐᕕᐊᓂᖅ ᑲᎬᖅᑕᕐᓂᖅ
- ᐃᓅᓯ ᐃᓚᐅᕐᓂᖅ (ᓇᓂᓕᕆᔨᒃᑯᓂᖅ)
- ᑲᑎᕋᖅᓯᒪᔪᖅ ᓇᒃ ᐊᑐᓇᓕᔪᓂᐊᑦ
- ᑲᑎᒪᔨᓂᐊᕐᓂᖅ ᐃᓚᐅᕐᓂᖅ
- ᐃᓕᓴᕐᕕᒃ ᑲᑎᕋᖅᓯᒪᔪᖅ
- ᐃᓕᓴᕐᕕᐊᓂᖅ
- ᓄᓇᕗᑦᐃᓕᓴᕐᓗᒍ ᑲᑎᕋᖅᓯᒪᔪᖅ
- ᑐᓴᕐᕕᒃᓴᖅ ᐃᓕᓴᕐᕕᒃ ᐃᓄᐃᑦ ᑲᑎᕋᖅᓯᒪᔪᖅ

ᑐᓴᕐᕕᒃᓴᖅ ᐃᓕᓴᕐᕕᒃ ᐃᓄᐃᑦ ᑲᑎᕋᖅᓯᒪᔪᖅ ᐊᒻᒪᓗ ᐃᓄᐃᑦ ᓄᓇᕗᑦᐃᓕᓴᕐᓗᒍ ᐃᓕᓴᕐᕕᒃ ᐃᓄᐃᑦ ᐊᑐᓚᑲᓇᑦ ᐊᒻᒪᓗ ᐃᓄᐃᑦ ᓄᓇᕗᑦᐃᓕᓴᕐᓗᒍ ᐃᓕᓴᕐᕕᒃ ᐃᓄᐃᑦ ᐊᑐᓚᑲᓇᑦ

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THE CREE HELPING CIRCLE

C) **HOW DO YOUTH LEAVE CARE?**
WHERE DO THEY GO AFTER THE GROUP HOME?

They go to:

- their home with parents
- school
- their community

Some kids talk about why they were at the group home. Some don't - not open - problems start again (after 3 months).

C) ᑕᓂ ᐃᓅᓯ ᐊᐃᔨᔪᖅ ᓄᓇᕗᑦ
ᑕᓂᐊᓕᒫᓂ ᑲᑎᒪᔨᓂᖓᓂ ᐊᒻᒪᓗ ᓄᓇᓕᖕᓂᖓᓂ .ᓄᓇ

- ᐅᓪᓗᒥᐅᑦ ᑐᓴᕐᕕᒃᓴᖅᑐᑦ ᐱᓕᕆᓂᖅ
- ᐊᑐᓕᕆᓂᖅ
- ᑐᑭᓯᒪᓂᖅ

ᑯᑦᓱᒃᑐᒃᑯᑦ ᐊᐃᔨᔪᖅ ᐊᑐᕐᓂᒃᑯᓗ (ᓄᓇ) ᓄᓇᕗᒻᒥᐅᑦ ᓄᓇᕗᒻᒥᐅᑦ
ᐅᑭᐅᒃᑯᑦ ᓄᓇᕗᒻᒥᐅᑦ ᐊᑐᕐᓂᒃᑯᓗ ᐃᓄᐃᑦ ᓄᓇᕗᒻᒥᐅᑦ ᐅᕙᓂ ᐊᒻᒪᓗ
ᓄᓇᕗᒻᒥᐅᑦ ᐃᓄᐃᑦ ᐊᑐᕐᓂᒃᑯᓗ ᐃᓄᐃᑦ ᓄᓇᕗᒻᒥᐅᑦ ᐅᕙᓂ ᐊᒻᒪᓗ

THE HELPING CIRCLE

A
Why are Kids in care?
ENTRY TOOL
Sensitivity & Understanding of child's needs. Understand adolescence. Legal issues. Level of skill in Bush.
Communication. Information. Ask? to Child, Parent, Family.
TOOLS FOR
Communication: Each other, youth, Parents. Support for Parents. Reaching out. Team work. Clarity of Roles. Programming. Patience. Humor.
B
What has to change before a youth can be able to successfully leave the group home?
LEAVING TOOLS
Prepare: Visits home, parent planning, work with S.S.W. Letting go.
C
Where do Kids go when they leave care?
Communication with Parents, School, Youth, Peers, Reaching out. Finding other supports eg: Youth Work.
ENTRY WORK (G.H.)
WORKING THROUGH / G.H.
LEAVING G.H.
HOME AND COMMUNITY
WORKER'S FAMILIES
COMMUNITY
PARENTS
YOUTH
FAMILY

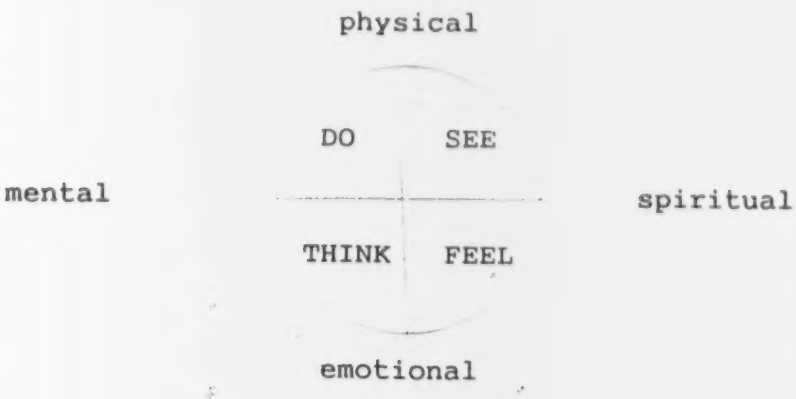
Appendix C

Notes on Medicine Wheel Presentation

- Introduction
- Simplify circles
- Elders did things simply

Medicine Wheel

- is a circle.



Natives use the circle as an explanation of life:

- sun goes in a circle
- young dependent on adults, then middle age and independent, followed by old age dependent on children, death closes the circle of life.
- the quadrants are presented as the four seasons, the four winds, and the four directions.

Explanation from elders: 4 components of individual.

Spiritual - the strength you get from believing in something stronger than yourself.

Emotional - Feeling - if good and peaceful they will be productive and good in the community. Kids we get act out their bad feelings of abandonment, unloved. Their actions show us they want help.

Mental - Ability to think out problems, make proper choices.

Physical - Selves - body. Problems if just fixated on physical self.

Individual needs to be balanced. FIxations at any force will cause disharmony, i.e. deficient in other quadrants. Emotionally if kids want to commit suicide - hasn't spent enough time in spiritual area so that he can "see" where he fits in the world around him.

In spirituality - ability to "see" prophecy has given natives ability to survice in the bush - dreams tell them where to hunt, where dangers are. If drinking - cuts out spiritual self and lack of ability to "see". If you can't see, you can't feel.

Emotional - We feel how we behave. In Cree terms if a drunk person hits another person people say the drunk person is hurting himself. If youth are in crisis emotionally, they can't think.

Mental - Ability to think. If you have mental abilities but you haven't dealt with your emotions, then you will use your intellect to cause harm.

Physical - What you do. Many times you do things without thinking through the consequences or feeling. Then bad choices are made.

When we take kids in we show them love. If a child feels love, he can love himself and subsequently others. Kids who break windows are saying they need love.

Bringing a new kid into the group home is like bringing a storm into the group home. As the child feels cared for, the storm calms. Then we can make a difference. Security needs to be there.

You don't talk about the circle to kid. The native way is to show it to him.

Looking at normal behaviour or development, there is no Cree word for normal. The term used in Cree is acceptance. More important to accept a child for what he is than to analyze whether or not he is normal.

Child is usually bounced around. If you accept him and respect that condition, it is usually the first time he may feel loved.

Ways to heal: Things that need to be learned

Spiritual

- one creator
- respect nature
- prayer

Emotional - ways to heal (release)

- sweating
- yelling
- crying
- laughing
- talking

Mental

- self-esteem (need to feel they count and make a difference)

Physical

- diet
- how we look
- what we do

(how do people organize
themselves in community)
POLITICAL

ECONOMIC (how you survive, hunt, barter) ——— CULTURAL

SOCIAL

Where does a child fit in society.

To participate one has to 1) balance self out

2) fit into one sector where he can be a good worker.

Prophecy from elders along time ago --> the clash of cultures will cause turmoil...

If keep knowledge of self & way of life will come through. Indianess comes from how you see life.

You don't shut your eyes to what you see, you need to deal with what presents itself.

Afternoon - 13:45

Adolescence of transition

Many changes - physically

- personality
- values, morals

Move towards independence

Studied in 2 phases

early 12-14, later 15-18

CREE LIFE CYCLE
1
4
12
15
18-20
20
E
• Umbilical Cord Kept decorated. Sac baby born in kept. passed on to provide protection, safety
• Traditional birth worn for Walking Ceremony
• Feast
• Baby
• Kids Living in the bush learn to do things sooner by watching.
• Celebrate 1st Kill. head of 1st Kill saved & decorated.
• Residential Schools 5-hg. 10 months a yr.
• School, visits Grand parents, learn legs
• play games, attend hockey. No failing elementary school.
• Church/Religion c/ Parents
• Celebration of 1st Kill.
• School in community Boarding home
• No outside Tent.
• Confirmation at Church.
• Boys. Fishing, hunting c/ Fathers
• Girls - crafts, Beadwork, food prep. chores, sewing Fishing c/ Mother
• Gun.
• Boys hunting
• Girls chores
• Fathers learn to trust son to hunt alone.
• Girls 1st period in outside tent.
• 1st Tobacco
• Beginning of Adulthood.
• Spiritual very important in Bush.
• Some Girls get pregnant early.
• Some Kids drop out of School
• Friends important → go outside house.
• lack of Birth control Info.
• Church/Religion
• Marriage for those in Bush were arranged.
• No drugs
• Spiritual very important in Bush
• No Wedding Gifts.
• Spiritual very important in Bush.
Medicine Wheel: Spiritual Teaching

Appendix E

Day 4 - 10:30 Joan Helping Plans / 12:30; 15:15.

Helping Path Plan: Christopher Steven

Goals (Based on Needs)	Helping Tools	Helpers	Right Time
1. For Christopher and Grandfather to decide where C. is going from G.H.: 15/12/88 - need for security - need to be loved - need to be listened to - need for good parenting - need to be connected with family	Communicate with variou people and be direct. #1 grandfather (i) extend court order (ii) will he ever take Christopher. vs --- #2 Foster Home #3 Natural Mother #4 Natural Father #5 John Murdock #6 Other family members eg: Uncle #7 Boarding School #8 Independent Living	Bella to talk to G. Father G.H. Staff to get --- Chris to talk about his feelings and what he wants.	Soon as possible Court order expires 15/12 When C. is ready to talk. Not when he is receiving consequences.
2. Christopher wants help in finding a part time job. - Fulfill need for direction - Feel he is controlling somethng, pay off debts. *Feel good*	Communication with businesses / $ eg: shovelling snow at Indian Center; packer at Metro. Communication: with C. about working up in the world. Programming: for C. needs to be a bit different because he's older than the other kids Consequences: age appropriate	Lynn C.C.W./ H.P./ & LYNN	Now

Goals (Based on Needs)	Helping Tools	Helpers	Right Time
3. To develop a realistic Life Plan - work & school - need to dream - needs to be connected	Communicate with C. about how you you get to be a particular type of person/profession Spiritual: Use of Medicine Wheel	G.H. Staff & Counsellor (School)	Now
4. To learn to cooperate and be responsible about his relationships with others	Pay back $ he stole Consequences for neg. behavior Consequences for pos. behavior	LYNN Louie - allowance ALL STAFF	Now As things happen

Appendix F

Training Agenda

The Medicine Wheel and the Cree Helping Circle

Date: September 26 - 29, 1988

Participants: Eight group home staff: six house parents
one coordinator
one childcare worker.
Two Social Service Workers
One representative from a newly formed band.

Observer: Coordinator from group home number one.

Trainers: - One non-native Treatment Services representative from a reception center south of the region.
- One non-native Professional Services representative from a reception center south of the region.
- One Native Chief from a Cree community in the region.

Facilitator: The author.

Place: Native Community in the Cree Territory.
Classroom donated by adult education for the duration of the training session.

Training Format: 1. Semi-circle - Desk arrangement when:
(A) trainers were giving information
(B) open discussion between participants, observer and trainer.
2. One large circle - problem solving exercises.
3. Two smaller groups - creation of child development model.

Interpreter: Participants took turns translating the training session into Cree.

Materials: Handouts included a Training Outline to orient group home staff and new participants (Appendix A: 34); pen, writing pad for each person, coloured markers, paper board and stand, scotch tape to hang paper on walls, refreshments. Trainers presented material and information of their own choice to cover specific topics.

Agenda:

Monday, September 26, 1988

18:00 - 20:00 - Prayer/Feast. The eldest houseparent in our group said a prayer to welcome the group and ask the creator for strength and support in the success of the upcoming training session.

20:00 - 22:00 - Trainers were introduced.
- Review of March 9, 1988 and September 9, 1988 meeting.
- The Helping Circle.
- Goal of training.
- Tools needed to help youth "work through" the group home and tools needed to help youth leave the group home. (Appendix B:43)

Tuesday, September 27, 1988

10:15 - 12:00 - Presentation by Native Chief on the medicine wheel as handed down by the elders. (Appendix C: 44)

12:00 - 13:45 - Lunch

13:45 - 19:00 - Child Development: The "White Way".
- Introduction to Erik Erikson's Stages of Development.
- Development of a Cree life cycle. (Appendix D: 49)

(Broke down into two groups)

Wednesday, September 28, 1988

10:15 - 12:00 - Kids with black clouds.

- Differentiation between anti-social or trouble maker cloud and emotional disturbance or emotional cloud.

12:00 - 16:30 - Break

16:30 - 19:00 - Building a Helping Path Plan.

Focus on a) Why kids are in care, b) where kids go when they leave care, c) what has constitutes kid's success enabling return to community.

Thursday, September 29, 1988

10:30 - 12:30 - Role play using a youth in the group home as a model to develop a plan. All participants were familiar with the youth.

15:15 - 19:00 - Development of a Helping Path Plan using a youth in the group home as a model.

(time?) - Completion

Saturday, October 1, 1988

13:00 - 17:00 - Open discussion on training session - a) Usefulness in terms of applicability and practicality and b) weaknesses and strengths.